FORM D

21-40143

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

FORM D

PURSUANT TO REGULATION D,

450section 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:	May 31, 2002					
Estimated average burden						
hours per form	1					

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						
/ /		,				

Name of Offering (check if the	is is an amendment and name has changed, a	nd indicate change.)	261
Jasper Consulting, Inc. 2000 Private Place			001
Filing Under (Check box(es) that apply):	☐ Rule 504 ☐ Rule 505 ☐ Rule	e 506 🔲 Section 4(6) 🔲 ULC	DE
Type of Filing: New Filing A	mendment to 2/8/02 Form D		
	A. BASIC IDENTIFICATION	DATA	
1. Enter the information requested about the	ssuer		
Name of Issuer (check if this is an amendation Jasper Consulting, Inc.	dment and name has changed, and indicate c	hange.)	
Address of Executive Offices	(Number and Street, City, State, Zip Code)		ding Area Code)
403 Fourth Street NW, Suite 200, P.O. Bo		(218) 759-0000	
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Inclu	ding Area Code)
(if different from Executive Offices)			
Brief Description of Business Develop and market fingerprint identification	ion systems	020	014116
Type of Business Organization			
	limited partnership, already formed	other (please specify):	
business trust	limited partnership, to be formed		PROCECOE.
Actual or Estimated Date of Incorporation or Organization:		Actual Estimat	J. JOCTOSEI
	CN for Canada; FN for other foreign jurisdic		THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by the United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E. and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sale of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

2. Enter the information requested for the fo	llowing:	_		
• Each promoter of the issuer, if the iss	suer has been organized with	in the past five years;		
 Each beneficial owner having the po the issuer; 	wer to vote or dispose, or di	rect the vote or disposition	n of, 10% or more	of a class of equity securities of
Each executive officer and director of	f corporate issuers and of co	rporate general and manag	ing partners of part	nership issuers; and
 Each general and managing partner of 	of partnership issuers.			
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner
Full Name (Last name, first, if individual) Roger Quint				
Business or Residence Address (Number and 403 Fourth Street NW, Suite 200, Bemidj	•)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name, first, if individual) John T. Zavoral				
Business or Residence Address (Number and RR1, Box 33B, E. Grand Forks, MN 567)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name, first, if individual) Gary Gangelhoff			***	
Business or Residence Address (Number and 3600 Moberg Drive, NW, Bemidji, MN 5	* * * * * * * * * * * * * * * * * * * *)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name, first, if individual) Keith Kiner				
Business or Residence Address (Number and 15489 Highway 5, Hamilton, ND 58238	Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner
Full Name (Last name, first, if individual) Harry S. Takhar				
Business or Residence Address (Number and 13510 Wildwood Road NE, Bemidji, 566	•)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name, first, if individual)				<u> </u>
Business or Residence Address (Number and	Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name, first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
(Use blan	k sheet, or copy and use addi	tional copies of this sheet	as necessary)	

	·											
				B. I	NFORMA	TION ABO	OUT OFFE	ERING				21
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No □		
••	Answer also in Appendix, Column 2, if filing under ULOE.								J			
2.	What is the					•		iect to Wais	/er		\$	*
۷.	What is the	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	ivestillent in	at will be at	cepted from	rany marvi	Juui. Suo	jeet to 17 al 1	VI	*********************	Yes	 No
3.	Does the off	fering permi	t joint owne	rship of a si	ngle unit?			•••••				
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any											
	commissioner similar remuneration for solicitation or purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or											
	states, list th	he name of	the broker	or dealer. I	f more than	five (5) pe	rsons to be	listed are as	sociated pe	rsons of su	ch a	
	broker or de								•			
Full Na	me (Last nar	me first, if i	ndividual)					, am, e				
Busine	ss or Resider	nce Address	(Number a	and Street,	City, State,	Zip Code)						*********
Name	of Associated	Broker or	Dealer					 .				
Name	n Associated	Diokei oi	Dealei							•		
States i	n Which Per	son Listed	Has Solicite	ed or Intend	ls to Solicit	Purchasers	· · · · · · · · · · · · · · · · · · ·					
(Ch	eck "All Stat	tes" or chec	k individua	al States)								All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last nar	ne first, if i	ndividual)									
Busines	ss or Residen	ice Address	(Number a	and Street, (City, State,	Zip Code)						
Name o	of Associated	Broker or	Dealer									
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	n Which Per			· · · · · · · · ·							_	
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Na	me (Last nar	ne first, if i	ndividual)									
				1.0	~ ~							
Busines	ss or Residen	ice Address	(Number a	and Street, (City, State,	Zip Code)						•
Name o	of Associated	Broker or	Dealer									
States i	n Which Per	son Listed	Has Solicite	ed or Intend	ls to Solicit	Purchasers						
	eck "All Stat											All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[ON]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

3 of 8 SEC 1972 (6/99)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			,
	Type of Security	Aggregate Offering Price		Amount Already Sold
		onering Frice		
	Debt	5		\$
	Equity	\$ <u>2,334,972.50</u>		\$ <u>2,334,972.50</u>
	☐ Common ☐ Preferred	•		e.
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests	\$		\$
	Other (Specify)	\$		\$
	Total	\$ <u>2,334,972.50</u>		\$ 2,334,972.50
	Answer also in Appendix, Column 3, if filing under ULOE			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			A
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	72		\$ 2,334,972.50
	Non-accredited Investors	0		\$ <u> </u>
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
		Type of		Dollar Amount
	Type of offering	Security		Sold
	Rule 505			\$
	Regulation A			\$
	Rule 504			\$
	Total			\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees		\boxtimes	\$20,000
	Accounting Fees		\boxtimes	\$10,000
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			s
	Other Expenses (identify)			\$
	Total		\boxtimes	\$30,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENS	ES AI	ND USE OF PROC	CEEDS	
	b. Enter the difference between the aggregate offering price given in response to P Question 1 and total expenses furnished in response to Part C - Question 4.a. difference is the "adjusted gross proceeds to the issuer."	art C - This			\$ <u>2,304,972.50</u>
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or propose used for each of the purposes shown. If the amount for any purpose is not k furnish an estimate and check the box to the left of the estimate. The total of the pay listed must equal the adjusted gross proceeds to the issuer set forth in response to P Question 4.b above.	nown, ments			
			Payments to Officers, Directors, & Affiliates		Payments To Others
	Salaries and fees		\$		\$
	Purchase of real estate		\$		\$
	Purchase, rental or leasing and installation of machinery and equipment		\$		\$
	Construction or leasing of plant buildings and facilities		\$		\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$		\$
	Repayment of indebtedness		\$		\$
	Working capital		\$		\$_1,304,972.50
	Other (specify): Research and Development		\$	\boxtimes	\$ 1,000,000
			\$		\$
			\$		\$
	Column Totals		\$	\boxtimes	\$ 2,304,972.50
	Total Payments Listed (column totals added)			2,304,	972.50
	D. FEDERAL SIGNAT	URE			
signatu	uer has duly caused this notice to be signed by the undersigned duly authorized persone constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2)	ange C	Commission, upon w		
Issuer (Print or Type) Signature	/-	11	Date	
Jasper Consulting, Inc.				Februa	ry 13, 2002
Name o	of Signer (Print or Type) Title of Signer (Print or Type)		, , ,		
Dougla	s M. Ramler, Esq. Secretary				

742715.1

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001)